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FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO CONFIRMATION NO. 10/767 099 01/30/2004 Honore Ivory Alexander CHR 1055 4589 TITLE OF INVENTION: SCAFFOLDING LIFT SYSTEM SMALL ENTITY ISSUE FEE **PUBLICATION FEE** APPLN, TYPE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$0 \$700 02/28/2006 EXAMINER ART UNIT **CLASS-SUBCLASS** THOMPSON, HUGH B 3634 182-145000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered natural attorneys or agents. If no name is listed, no name will be printed. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. 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